

## STATE OF NEW HAMPSHIRE

## 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

## PLEASE PRINT

I. Name of Lobbyist(s) _	Robert L. Best			
II. Name of lobbyist's pa	rtnership, firm or corporation, if	any:		
Sulloway & F	Hollis, P.L.L.C.			
	partnership, firm or corporation)			
9 Capitol Stre	eet Concord	New Hampshire	03301	
Business Address: (Street)	(Town/City)	(State)	(Zip Code)	
(603) <u>224-2341</u> (Telephone)	(603) <u>226-2404</u>		e-mail <u>rbest@sullowa.com</u>	
reportable expense trans	actions which are not attributable	,		
☐ All reportable transacti	ons occurring in the months prior to	o the reporting date relative to the fol	lowing client:	
	Il Name of Client as it appears on the I	obbyist Registration Form)		
OR		,		
☐ All reportable transaction unrelated to any particular		obbyist's family), or the lobbying firm	n listed below which are	
	pril 26, 2017 🗍	July 26, 2017 []		
	om date of registration to 3/31/17	activity from 4/1/17 to 6/30/17		
	ctober 25, 2017 [V] ity from 7/1/17 to 9/30/17	January 31, 2018 [] activity from 10/1/17 to 12/31/17		
		le transactions made since the la the Secretary of State's Office, State		
VI. Check if additional re	ports are attached:			
	•	file Addendum A- Fees and Expens	ses	
		ou must file Addendum B- Report		
☐ If you, your firm, or yo	our family has made political contri	butions, you must file Addendum C	- Political Contributions	
Sworn Statement/Affirma I have read RSA 15, RSA I and complete to the best of (Signature of lobbynt)	5-B, RSA 14-C and RSA 664 and	hereby swear or affirm that the foreg		
(Print Name of lobbyist)				